

## § 414.1

### Subpart G [Reserved]

### Subpart H—Fee Schedule for Ambulance Services

- 414.601 Purpose.
- 414.605 Definitions.
- 414.610 Basis of payment.
- 414.615 Transition to the ambulance fee schedule.
- 414.617 Transition from regional to national ambulance fee schedule.
- 414.620 Publication of the ambulance fee schedule.
- 414.625 Limitation on review.

### Subpart I—Payment for Drugs and Biologicals

- 414.701 Purpose.
- 414.704 Definitions.
- 414.707 Basis of payment.

### Subpart J—Submission of Manufacturer's Average Sales Price Data

- 414.800 Purpose.
- 414.802 Definitions.
- 414.804 Basis of payment.
- 414.806 Penalties associated with the failure to submit timely and accurate ASP data.

### Subpart K—Payment for Drugs and Biologicals Under Part B

- 414.900 Basis and scope.
- 414.902 Definitions.
- 414.904 Average sales price as the basis for payment.
- 414.906 Competitive acquisition program as the basis for payment.
- 414.908 Competitive acquisition program.
- 414.910 Bidding process.
- 414.912 Conflicts of interest.
- 414.914 Terms of contract.
- 414.916 Dispute resolution for vendors and beneficiaries.
- 414.917 Dispute resolution and process for suspension or termination of approved CAP contract.
- 414.918 Assignment.
- 414.920 Judicial review.

### Subpart L—Supplying and Dispensing Fees

- 414.1000 Purpose.
- 414.1001 Basis of Payment.

AUTHORITY: Secs. 1102, 1871, and 1881(b)(1) of the Social Security Act (42 U.S.C. 1302, 1395hh, and 1395rr(b)(1)).

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### Subpart A—General Provisions

#### § 414.1 Basis and scope.

This part implements the following provisions of the Act:

1802—Rules for private contracts by Medicare beneficiaries.

1833—Rules for payment for most Part B services.

1834(a) and (h)—Amounts and frequency of payments for durable medical equipment and for prosthetic devices and orthotics and prosthetics.

1834(l)—Establishment of a fee schedule for ambulance services.

1834(m)—Rules for Medicare reimbursement for telehealth services.

1842(o)—Rules for payment of certain drugs and biologicals.

1847(a) and (b)—Competitive bidding for certain durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS).

1848—Fee schedule for physician services.

1881(b)—Rules for payment for services to ESRD beneficiaries.

1887—Payment of charges for physician services to patients in providers.

[67 FR 9132, Feb. 27, 2002, as amended at 69 FR 1116, Jan. 7, 2004; 71 FR 48409, Aug. 18, 2006]

#### § 414.2 Definitions.

As used in this part, unless the context indicates otherwise—

*AA* stands for anesthesiologist assistant.

*AHPB* stands for adjusted historical payment basis.

*CF* stands for conversion factor.

*CRNA* stands for certified registered nurse anesthetist.

*CY* stands for calendar year.

*FY* stands for fiscal year.

*GAF* stands for geographic adjustment factor.

*GPCI* stands for geographic practice cost index.

*HCPCS* stands for CMS Common Procedure Coding System.

*Physician services* means the following services to the extent that they are covered by Medicare:

(1) Professional services of doctors of medicine and osteopathy (including osteopathic practitioners), doctors of optometry, doctors of podiatry, doctors